Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF MARYLAND		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this is a amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Tonya First name Middle name	First name Middle name
	Bring your picture identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1274	

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Debtor 1 Tonya Lawson Case number (if known)

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
Where you live	4705 Shamrock Ave. Baltimore, MD 21206	If Debtor 2 lives at a different address:
	Number, Street, City, State & ZIP Code Baltimore City County	Number, Street, City, State & ZIP Code County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s) EINs Where you live 4705 Shamrock Ave. Baltimore, MD 21206 Number, Street, City, State & ZIP Code Baltimore City County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing this district to file for bankruptcy Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason.

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Deb	otor 1 Tonya Lawson				Case number (if known)	
Par	t 2: Tell the Court About	Your Bankruptcy (Case			
7.	The chapter of the Bankruptcy Code you are			each, see <i>Notice Required by</i> age 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Be box.	ankruptcy
	choosing to file under	☐ Chapter 7				
		☐ Chapter 11				
		☐ Chapter 12				
		Chapter 13				
8.	How you will pay the fee	about how	you may pay. Typica ur attorney is submit	ally, if you are paying the fee yo	k with the clerk's office in your local court for ourself, you may pay with cash, cashier's che alf, your attorney may pay with a credit card o	ck, or money
					on, sign and attach the Application for Individ	uals to Pay
		ŭ	Fee in Installments (,	n only if you are filing for Chapter 7. By law, a	iudae may
		but is not re applies to y	equired to, waive you our family size and y	ur fee, and may do so only if yo you are unable to pay the fee ir	rolly if you are filling for Chapter 7. By law, a ur income is less than 150% of the official point installments). If you choose this option, you cial Form 103B) and file it with your petition.	verty line that
9.	Have you filed for					
٠.	bankruptcy within the	■ No.				
	last 8 years?	☐ Yes.				
		Distric		When	Case number	
		Distric		When		
		Distric	t	When	Case number	
10.	Are any bankruptcy	■ No				
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.				
		Debto	r		Relationship to you	
		Distric	t	When	Case number, if known	
		Debto	r		Relationship to you	
		Distric	t	When	Case number, if known	
11.	Do you rent your residence?	■ No. Go to	o line 12.			
		☐ Yes. Has	your landlord obtaine	ed an eviction judgment agains	t you?	
			No. Go to line 12.			
			Yes. Fill out <i>Initia</i> this bankruptcy p		Judgment Against You (Form 101A) and file i	t as part of

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Den	ion i ronya Lawson			Case Humber (ii known)
Par	Report About Any Bu	ısinesses	You Own as a Sole Propri	etor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bu	usiness
	A sole proprietorship is a			
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, St	ate & ZIP Code
	it to this petition.		Check the appropriate b	oox to describe your business:
			☐ Health Care Bus	iness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Rea	al Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as)	defined in 11 U.S.C. § 101(53A))
			☐ Commodity Brok	xer (as defined in 11 U.S.C. § 101(6))
			☐ None of the abo	ve
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you indicate that you are	e court must know whether you are a small business debtor so that it can set appropriate e a small business debtor, you must attach your most recent balance sheet, statement of lederal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am not filing under Cha	apter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapte Code.	r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapte	r 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
D	Down and W. Voor Community		. II d B A	Proceeds That No. de Issue Maria Array Con
Par			y Hazardous Property or A	ny Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is	■ No.		
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?	
	public health or safety? Or do you own any property that needs		If immediate attention is	
	immediate attention?		needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
	•			Number, Street, City, State & Zip Code

Debtor 1 Tonya Lawson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1	Tonya Lawson			Case nur	mber (if known)
Par	t 6:	Answer These Questi	ons for Rep	orting Purposes		
	What	kind of debts do	16a. <i>A</i>	Are your debts primarily co	onsumer debts? Consumer debts are conal, family, or household purpose."	defined in 11 U.S.C. § 101(8) as "incurred by an
			[☐ No. Go to line 16b.		
			ı	Yes. Go to line 17.		
					usiness debts? Business debts are destructions of the learning	
			[☐ No. Go to line 16c.		
			[☐ Yes. Go to line 17.		
			16c. S	State the type of debts you o	we that are not consumer debts or busi	iness debts
17.		ou filing under ster 7?	■ No.	am not filing under Chapter	7. Go to line 18.	
	after prop	ou estimate that any exempt erty is excluded and nistrative expenses		are paid that funds will be av	Do you estimate that after any exempt p ailable to distribute to unsecured credite	property is excluded and administrative expenses ors?
	are p	aid that funds will		⊒ No ⊒ Yes		
	distri	vailable for ibution to unsecured tors?	·	⊒ Yes		
18.		many Creditors do	1 -49		1 ,000-5,000	□ 25,001-50,000
	you e	estimate that you	☐ 50-99		<u></u> 5001-10,000	☐ 50,001-100,000
			☐ 100-199 ☐ 200-999		□ 10,001-25,000	☐ More than100,000
19.	How	much do you	□ \$0 - \$50	0,000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
		nate your assets to orth?	□ \$50,001	- \$100,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion
	DC 11	orur.	. ,	1 - \$500,000	□ \$50,000,001 - \$100 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion
			□ \$500,00	11 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
20.		much do you	□ \$0 - \$50	0,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	estin to be	nate your liabilities ?	\$50,00	1 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion
				11 - \$500,000	□ \$50,000,001 - \$100 million □ \$100.000.001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
			₩ \$500,00	11 - \$1 million	1 \$100,000,001 - \$300 million	More than \$50 billion
Par	t 7:	Sign Below				
For	you		I have exar	nined this petition, and I dec	clare under penalty of perjury that the in	formation provided is true and correct.
					, I am aware that I may proceed, if eligil elief available under each chapter, and	ble, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.
					not pay or agree to pay someone who is e notice required by 11 U.S.C. § 342(b)	
			I request re	elief in accordance with the c	chapter of title 11, United States Code, s	specified in this petition.
				case can result in fines up t		ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,
			Tonya La Signature d	wson	Signature of De	ebtor 2
			Executed of	January 13, 2020 MM / DD / YYYY	Executed on	MM / DD / YYYY
				WINT DD / TTT	'	WWW. 7 DD / 1111

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Debtor 1 Tonya Lawson Case number (if known)	
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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Alexander Sanchez Signature of Attorney for Debtor	Date	January 13, 2020 MM / DD / YYYY
Alexander Sanchez		
Sanchez Garrison & Associates, LLP		
575 S. Charles St. Suite 404		
Baltimore, MD 21201		
Number, Street, City, State & ZIP Code		
Contact phone 410-734-2200	Email address	Sanchez@SanchezGarrison.com
02732 MD		
Bar number & State		

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Fill	in this informa	ation to identify your	case:			
Deb	otor 1	Tonya Lawson				
Deb	otor 2	First Name	Middle Name	Last Name		
	use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ban	kruptcy Court for the:	DISTRICT OF MARYLA	ND		
	se number				_	neck if this is an nended filing
Of	ficial For	m 106Sum				
				d Certain Statistical Information		12/15
info	rmation. Fill o	ut all of your schedul	es first; then complete th	are filing together, both are equally responsible information on this form. If you are filing ame the box at the top of this page.		
Par	t 1: Summa	rize Your Assets				
						ur assets ue of what you own
1.	Schedule A/I 1a. Copy line	B: Property (Official Foundation 55, Total real estate, for	orm 106A/B) rom Schedule A/B		\$	95,000.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B		\$	12,300.00
	1c. Copy line	63, Total of all propert	y on Schedule A/B		\$	107,300.00
Par	t 2: Summa	rize Your Liabilities				
						ur liabilities ount you owe
2.			laims Secured by Property mn A, Amount of claim, at t	(Official Form 106D) he bottom of the last page of Part 1 of <i>Schedule D</i>	o \$ _	70,606.00
3.			Unsecured Claims (Official 1 (priority unsecured claims	Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	\$	2,800.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured cl	aims) from line 6j of Schedule E/F	\$	32,346.00
				Your total liabilit	ies \$	105,752.00
Par	t 3: Summa	rize Your Income and	l Expenses			
4.		our Income (Official Fo		I	. \$	5,371.76
5.	Schedule J: \ Copy your mo	Your Expenses (Officia onthly expenses from li	Form 106J) ne 22c of <i>Schedule J</i>		\$ _	4,370.00
Par	t 4: Answer	These Questions for	Administrative and Statis	stical Records		
6.		• • •	er Chapters 7, 11, or 13? on this part of the form. Ch	neck this box and submit this form to the court with	your other	schedules.
7.	YesWhat kind of	f debt do you have?				
				lebts are those "incurred by an individual primarily g for statistical purposes. 28 U.S.C. § 159.	for a perso	nal, family, or
		ebts are not primarily t with your other sched		e nothing to report on this part of the form. Check	this box ar	nd submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Tonya Lawson Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

7,538.00

\$

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total o	laim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	2,800.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	17,140.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	19,940.00

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		156 20-1042			JE 10 01		
Fill in this infor	mation to identify y	our case and th	is filing	i:			
Debtor 1	Tonya Lawso						
Debtor 2	First Name	Middle	Name	Last Name			
(Spouse, if filing)	First Name	Middle	Name	Last Name			
United States Ba	ankruptcy Court for t	he: DISTRICT	OF MAI	RYLAND			
Case number _							☐ Check if this is an amended filing
Schedul n each category, s hink it fits best. B	Be as complete and a	scribe items. List a	e. If two	only once. If an asset fits in more than one of married people are filing together, both are exists.	qually respo	onsible for su	pplying correct
Answer every ques	stion.	·		nis form. On the top of any additional pages, Estate You Own or Have an Interest In	write your n	ame and cas	e number (if known).
Street address,	mrock Ave. if available, or other descr		What	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	the amount	of any secure /ho Have Claii	aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the
Baltimore		21206-0000		Land	entire prop	-	portion you own?
City	State	ZIP Code	□ □ Who	Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Describe the		\$95,000.00 your ownership interest ancy by the entireties, or
Baltimore	City			Debtor 2 only			
County	-		□ □ Othe	Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this item	(see ins	tructions)	nmunity property
			r all of	erty identification number: your entries from Part 1, including any e		=>	\$95,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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Deb	otor 1 T	onya Laws	on		Case number (if know	n)	
3. C	ars, vans,	trucks, trace	tors, sport utility ve	hicles, motorcycles			
] No						
	Yes						
		DAMA			Do not deduct	secured di	aims or exemptions. Put
3.1		X5		Who has an interest in the property? Check one	the amount of a	any secure	d claims on Schedule D:
	Model: Year:	2011		Debtor 1 only			ns Secured by Property.
		nate mileage:	105000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value entire propert		Current value of the portion you own?
		ormation:		☐ At least one of the debtors and another		, .	,
				☐ Check if this is community property (see instructions)	\$5,6	00.00	\$5,600.00
5 / Part Do	Descrii you own o	have attached be Your Person or have any leading goods and f	ed for Part 2. Write nal and Household It egal or equitable in	terest in any of the following items?		ŗ	\$5,600.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
ı	Yes. De	scribe	Bedroom Set; L	.iving Room Set; Misc. tables, chairs, de	esks, lamps	-	\$600.00
		Televisions a including cell		eo, stereo, and digital equipment; computers, pri nedia players, games	inters, scanners; musi	c collectic	ons; electronic devices
			TV; Computer;	Cell Phone			\$350.00
		Antiques and other collection	figurines; paintings, ons, memorabilia, co	prints, or other artwork; books, pictures, or other illectibles	r art objects; stamp, co	oin, or bas	seball card collections;
	Examples:	musical instru	graphic, exercise, ar	nd other hobby equipment; bicycles, pool tables,	golf clubs, skis; canoe	es and ka	yaks; carpentry tools;
	☐ Yes. De	scribe					
_	Firearms Examples ■ No	: Pistols, rifles	s, shotguns, ammuni	tion, and related equipment			

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Debtor 1	Tonya Laws	on			Case number (if known)	
☐ Yes	. Describe					
☐ No		othes, fur	s, leather coats, de	esigner wear, shoes, accessories		
		4 seas	sons of clothing			\$375.00
□ No		welry, co	stume jewelry, eng	agement rings, wedding rings, heirloom je	welry, watches, gems, gc	old, silver
		Costu	me Jewelry			\$200.00
Exan ■ No	arm animals nples: Dogs, cats,	birds, ho	rses			
		nd house	hold itoms you di	d not already list, including any health a	aide vou did not list	
■ No	. Give specific in		-	a not already list, including any health (aids you did not list	
				Part 3, including any entries for pages	you have attached	\$1,525.00
	escribe Your Finan			in any of the following?		Current value of the
Do you o	will of have any i	egai oi e	quitable interest	in any of the following?		portion you own? Do not deduct secured claims or exemptions.
□ No	nples: Money you	·	•	nome, in a safe deposit box, and on hand	when you file your petition	n
					Cash	\$75.00
				counts; certificates of deposit; shares in cr ts with the same institution, list each.	edit unions, brokerage ho	ouses, and other similar
■ Yes	i			Institution name:		
		17.1.	Checking	First Financial Credit Union		\$0.00
		17.2.	Savings	First Financial Credit Union		\$0.00
			cly traded stocks ent accounts with b	rokerage firms, money market accounts		
☐ Yes			Institution or issue	r name:		

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De	ebtor 1	Tonya Lawson		Ca	ase number (if known)	
19.	joint v		nterests in incorporated	and unincorporated businesses,	including an interest in a	n LLC, partnership, and
	■ No					
	☐ Yes.	Give specific information a Name	bout theme of entity:	Ç	% of ownership:	
20.	Negotia	able instruments include pe	ersonal checks, cashiers'	e and non-negotiable instruments checks, promissory notes, and mon- to someone by signing or delivering		
	☐ Yes. (Give specific information at Issue	oout them er name:			
21.		nent or pension accounts oles: Interests in IRA, ERISA		thrift savings accounts, or other per	nsion or profit-sharing plans	
	Yes.	List each account separate Type of	ly. faccount:	Institution name:		
		401(k)		Corporate Managed		\$4,000.00
22.	Your sl		you have made so that y	ou may continue service or use fron utilities (electric, gas, water), telecon		r others
	_			Institution name or individual:		
23.	Annuiti ■ No	ies (A contract for a periodi	c payment of money to y	ou, either for life or for a number of y	vears)	
	■ No □ Yes	lssuer name	and description.			
24.		s in an education IRA, in C. §§ 530(b)(1), 529A(b), an		ed ABLE program, or under a qual	ified state tuition program	
	☐ Yes	Institution na	ame and description. Sep	arately file the records of any interes	ets.11 U.S.C. § 521(c):	
25.	Trusts, ■ No	equitable or future intere	ests in property (other t	han anything listed in line 1), and	rights or powers exercisa	ble for your benefit
	☐ Yes.	Give specific information a	bout them			
26.		s, copyrights, trademarks bles: Internet domain names		er intellectual property m royalties and licensing agreement	S	
	☐ Yes.	Give specific information a	bout them			
27.	Examp	es, franchises, and other bles: Building permits, exclu		e association holdings, liquor license	es, professional licenses	
	■ No □ Yes.	Give specific information a	bout them			
M	oney or p	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref ☐ No	unds owed to you				
	■ Yes.	Give specific information ab	pout them, including whe	ther you already filed the returns and	the tax years	
			Anticipated 20	020 tax refund	Federal	\$600.00

De	btor 1	Tonya Lawson		C	ase number (if known)	
			Anticipated 2020 tax refund		State	\$500.00
ı	Examp ■ No	r support ples: Past due or lump sum alin Give specific information	nony, spousal support, child support, ma	aintenance, divorc	e settlement, property s	ettlement
		amounts someone owes you ples: Unpaid wages, disability in benefits; unpaid loans you	nsurance payments, disability benefits, s u made to someone else	sick pay, vacation	pay, workers' compens	ation, Social Security
ı	☐ Yes.	Give specific information				
		sts in insurance policies ples: Health, disability, or life in	surance; health savings account (HSA);	credit, homeowne	er's, or renter's insuranc	e
ļ	■ Yes.	Name the insurance company Compan	of each policy and list its value. y name:	Beneficiary	<i>y</i> :	Surrender or refund value:
		Employ	yer	Crystal D	Oukes	\$0.00
!	Examµ ■ No		er or not you have filed a lawsuit or m sputes, insurance claims, or rights to su		or payment	
ı	■ No	contingent and unliquidated of Describe each claim	claims of every nature, including cou	nterclaims of the	e debtor and rights to s	set off claims
ı	■ No	nancial assets you did not alr	eady list			
36.			entries from Part 4, including any ent			\$5,175.00
Par	rt 5: De	escribe Any Business-Related Pro	perty You Own or Have an Interest In. List	any real estate in	Part 1.	
•	No. Go	own or have any legal or equitable to Part 6. Go to line 38.	le interest in any business-related property	₁ ?		
Par		escribe Any Farm- and Commercia you own or have an interest in farmla	al Fishing-Related Property You Own or Ha and, list it in Part 1.	ave an Interest In.		
46.	■ No.	u own or have any legal or eq Go to Part 7. s. Go to line 47.	uitable interest in any farm- or comm	ercial fishing-rel	ated property?	

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Debtoi	Tonya Lawson		Case number (if known)	
Part 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
	you have other property of any kind you did not already list? kamples: Season tickets, country club membership			
	No			
	es. Give specific information			
54. A	dd the dollar value of all of your entries from Part 7. Write tha	t number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. P	art 1: Total real estate, line 2			\$95,000.00
56. P	art 2: Total vehicles, line 5	\$5,600.00		
57. P	art 3: Total personal and household items, line 15	\$1,525.00		
58. P	art 4: Total financial assets, line 36	\$5,175.00		
59. P	art 5: Total business-related property, line 45	\$0.00		
60. P	art 6: Total farm- and fishing-related property, line 52	\$0.00		
61. P	art 7: Total other property not listed, line 54 +	\$0.00		
62. T	otal personal property. Add lines 56 through 61	\$12,300.00	Copy personal property total	\$12,300.00
63. T	otal of all property on Schedule A/B. Add line 55 + line 62			\$107,300.00

	Case	20-10421 DUC.	1 Fileu 01/13/20 1	rage 10 01 40	
Fill in this infor	mation to identify your	case:			
Debtor 1	Tonya Lawson				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF MARYLA	ND		
Case number					
(if known)					Check if this is an amended filing
Official Fo	orm 106C				
		operty You C	laim as Exem _l	pt	4/19
the property you	listed on Schedule A/B: F	Property (Official Form 106	filing together, both are equally A/B) as your source, list the proditional Page as necessary. On	operty that you claim a	as exempt. If more space is

case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.										
	■ You are claiming state and federal nonban	■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)								
	☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)									
2.	For any property you list on Schedule A/B									
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption					
		Copy the value from Schedule A/B	Check only one box for each exemption.							
	4705 Shamrock Ave. Baltimore, MD	\$95,000.00		\$25,150.00	Md. Code Ann., Cts. & Jud.					
	21206 Baltimore City County Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	Proc. § 11-504(f)(1)(i)(2)					
	4705 Shamrock Ave. Baltimore, MD 21206 Baltimore City County	, MD \$95,000.00 ■ \$6,000.0		\$6,000.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)					
	Line from Schedule A/B: 1.1		100% of fair market value, up to any applicable statutory limit		1100. 3 11-30-(0)(3)					
	4705 Shamrock Ave. Baltimore, MD 21206 Baltimore City County	\$95,000.00		\$3,250.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)					
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	Froc. § 11-304(i)(1)(i)(1)					
	Bedroom Set; Living Room Set; Misc. tables, chairs, desks, lamps	\$600.00		\$600.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4)					
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	1100.3 11 004(0)(4)					
	TV; Computer; Cell Phone Line from Schedule A/B: 7.1	\$350.00	-	\$350.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4)					

Official Form 106C

100% of fair market value, up to any applicable statutory limit

Part 1: Identify the Property You Claim as Exempt

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De	ebtor 1 Tonya Lawson			Case number (if known)		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	4 seasons of clothing Line from Schedule A/B: 11.1	\$375.00		\$375.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)	
				100% of fair market value, up to any applicable statutory limit		
	Costume Jewelry Line from Schedule A/B: 12.1	\$200.00		\$200.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)	
	Line Holli Golleddie PAB. 12.1			100% of fair market value, up to any applicable statutory limit	1100.3 11 304(1)(1)(1)(1)	
	Cash Line from Schedule A/B: 16.1	\$75.00		\$75.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)	
	Line Holli Schedule Arb. 10.1			100% of fair market value, up to any applicable statutory limit	1100. 3 11-30-(1)(1)(1)(1)	
	401(k): Corporate Managed Line from Schedule A/B: 21.1	\$4,000.00		\$4,000.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(h)	
	2.10 110111			100% of fair market value, up to any applicable statutory limit		
	Federal: Anticipated 2020 tax refund Line from Schedule A/B: 28.1	\$600.00		\$600.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)	
	Line Holli Golleddie PAB. 20.1			100% of fair market value, up to any applicable statutory limit	1100.3 11 304(1)(1)(1)(1)	
	State: Anticipated 2020 tax refund Line from Schedule A/B: 28.2	\$500.00		\$500.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)	
	Ellio Holli Golloddio 772. 2012			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every No			led on or after the date of adjustmer	nt.)	
	☐ Yes. Did you acquire the property cover☐ No	ed by the exemption wi	ithin 1	,215 days before you filed this case	?	
	☐ Yes					

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Fill in this information to i	dentify your	case:				
Debtor 1 Tonya	Lawson					
First Nam	е	Middle Name Las	t Name			
Debtor 2 (Spouse if, filling) First Name	e	Middle Name Las	t Name			
0,						
United States Bankruptcy C	ourt for the:	DISTRICT OF MARYLAND				
Case number						
(if known)						k if this is an
					amen	ided filing
Official Form 106D						
	ditore !	Who Have Claims Se	curoc	hy Proport	.,	40/45
Scriedule D. Cre	unus	WIIO Have Claims Sec	curec	by Propert	<u>y </u>	12/15
		two married people are filing together, both, number the entries, and attach it to thi				
number (if known).	r age, mi it ou	it, number the entries, and attach it to the	3 101111. 01	Title top of any addition	iai pages, write your in	anie and case
1. Do any creditors have claim	s secured by y	our property?				
□ No. Check this box a	nd submit this	s form to the court with your other sche	edules. Yo	ou have nothing else t	o report on this form.	
Yes. Fill in all of the i	nformation be	elow.				
Part 1: List All Secured	Claims					
2. List all secured claims. If a	creditor has mo	ore than one secured claim, list the creditor	separately	Column A	Column B	Column C
		particular claim, list the other creditors in Pal order according to the creditor's name.	art 2. As	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
much as possible, list the claims	s iii aipiiabelica	rorder according to the creditor smalle.		value of collateral.	claim	If any
2.1 Credit Acceptance		Describe the property that secures the cl	aim:	\$16,134.00	\$5,600.00	\$10,534.00
Creditor's Name	;	2011 BMW X5 105000 miles				
PO Box 513		As of the date you file, the claim is: Check apply.	all that			
Southfield, MI 4803		☐ Contingent				
Number, Street, City, State &	Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt? Check	one. I	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortg	age or sec	ured		
Debtor 2 only		car loan) —				
Debtor 1 and Debtor 2 only		Statutory lien (such as tax lien, mechanic	c's lien)			
At least one of the debtors a		☐ Judgment lien from a lawsuit				
☐ Check if this claim relates community debt	to a	Other (including a right to offset)				

Date debt was incurred 2018

Last 4 digits of account number

9003

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Debtor 1 Tonya Lawson		Case number (if known)		
First Name Middle N	lame Last Name	-		
Dovenmuenle Mortgage, INC	Describe the property that secures the claim:	\$54,472.00	\$95,000.00	\$0.00
Creditor's Name	4705 Shamrock Ave. Baltimore, MD 21206 Baltimore City County			
1 Corporate Drive Suite 360 Lake Zurich, IL 60047	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or secar loan)	ecured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number 9746			
Add the dollar value of your entries in C	Column A on this page. Write that number here:	\$70,606.0	0	
If this is the last page of your form, add Write that number here:	the dollar value totals from all pages.	\$70,606.0		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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Fill	in this informa	ation to identify your	case:							
De	btor 1	Tonya Lawson								
_		First Name	Middle	Name	Last Nam	е				
	btor 2 ouse if, filing)	First Name	Middle	Name	Last Nam	e				
Lin	itad Statas Bank	cruptov Court for the	DISTRICT	OE MADVI	AND					
Un	ited States Barir	cruptcy Court for the:	DISTRICT	OF MARYL	AND					
	se number									
(if k	nown)								•	this is an
									amende	a niing
Of	ficial Form	106E/F								
Sc	hedule E/	F: Creditors W	ho Hav	e Unsec	ured Claim	S				12/15
any Sch Sch left. nam	executory contra edule G: Executo edule D: Creditor Attach the Contil e and case numb	accurate as possible. Us icts or unexpired leases ryy Contracts and Unexp s Who Have Claims Sec nuation Page to this pag per (if known).	that could re ired Leases (ured by Prop je. If you have	esult in a clain (Official Form erty. If more s e no informati	n. Also list execute 106G). Do not incl space is needed, co	ory contracts ude any cred opy the Part	s on Schedule A/B: litors with partially you need, fill it out,	Property (O secured cla number the	fficial Form tims that are e entries in	106A/B) and on e listed in the boxes on the
		s have priority unsecure								
	☐ No. Go to Par		o.ao aga							
	Yes.									
2.	identify what type possible, list the control of the Part 1. If more that	oriority unsecured claim of claim it is. If a claim had claims in alphabetical order an one creditor holds a particular on of each type of claim, see the control of the	as both priority er according to articular claim,	and nonpriorion the creditor's list the other c	ty amounts, list that name. If you have r creditors in Part 3.	claim here ar nore than two	nd show both priority	and nonprior	rity amounts t the Continu	. As much as
2.1	Comptro	ller of MD		Last 4 digits	of account number		\$2,800.00		\$0.00	\$2,800.00
	Priority Cred	litor's Name				-		_		ΨΞ,σσσ.σσ
	110 Carro			When was the	e debt incurred?	2006-20	08	_		
		s, MD 21411 eet City State Zip Code		As of the date	e you file, the claim	is: Check al	I that apply			
	Who incurred t	the debt? Check one.		☐ Contingent	t					
	Debtor 1 onl	у		☐ Unliquidate	ed					
	Debtor 2 onl	у		☐ Disputed						
	Debtor 1 and	d Debtor 2 only		Type of PRIO	RITY unsecured cl	aim:				
	☐ At least one	of the debtors and anothe	er	☐ Domestic s	support obligations					
	☐ Check if thi	s claim is for a commu	nity debt	Taxes and	certain other debts	you owe the	government			
	Is the claim su		=	☐ Claims for	death or personal in	jury while you	were intoxicated			
	■ No			☐ Other. Spe	ecify					
	☐ Yes									
Pa	rt 2: List All	of Your NONPRIORIT	Y Unsecure	ed Claims						
3.	Do any creditors	s have nonpriority unsec	cured claims	against you?						
	☐ No. You have	nothing to report in this p	art. Submit th	is form to the o	ourt with your other	schedules.				
	Yes.									
4.	List all of your nunsecured claim,	nonpriority unsecured cl list the creditor separatel holds a particular claim, I	y for each clai	m. For each cl	aim listed, identify w	hat type of cl	aim it is. Do not list c	aims alread	y included ir	Part 1. If more

Total claim

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Debtor	1 Tonya Lawson	Case number (if known)				
4.1	Baltimore City Water (Finance Director)	Last 4 digits of account number	\$6,000.00			
	Nonpriority Creditor's Name 200 Holiday St. Baltimore, MD 21202	When was the debt incurred?				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Utilities				
4.2	Bright Lending Nonpriority Creditor's Name	Last 4 digits of account number	\$1,200.00			
	PO Box 578 Hays, MT 59527	When was the debt incurred? 2019				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	_	П				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another	Student loans				
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Credit				
4.3	Capital One Bank, N.A. Nonpriority Creditor's Name	Last 4 digits of account number 4466	\$268.00			
	P.O. Box 30281 Salt Lake City, UT 84130-0281	When was the debt incurred? 2019				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Credit card purchases				

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Debto	r 1 Tonya Lawson		Case number (if known)	
4.4	CB/Indigo	Last 4 digits of account number	1741	\$648.00
	Nonpriority Creditor's Name PO Box 4499	When was the debt incurred?	2018-2019	
	Beaverton, OR 97076 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	7.0 0 , , ,	or onook all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	-	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	
4.5	Credit One	Last 4 digits of account number	6511	\$635.00
	Nonpriority Creditor's Name P.O. Box 98872	When was the debt incurred?	2017-2019	
	Las Vegas, NV 89193	when was the dept incurred?	2017-2019	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharin		
	Yes	Other. Specify Credit card	purchases	
4.6	CreditCube Nonpriority Creditor's Name	Last 4 digits of account number		\$800.00
	P.O. Box 133 Finley, CA 95435	When was the debt incurred?	2019	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin	g pians, and other similar debts	
	Yes	Other. Specify Credit		

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Debtor	1 Tonya Lawson	Case	number (if known)	
4.7	IC System	Last 4 digits of account number 865	7	\$1,920.00
	Nonpriority Creditor's Name PO Box 64378 Saint Paul, MN 55164	When was the debt incurred? 201	8-2109	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Che	ck all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim	:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation a report as priority claims	agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing plans	s, and other similar debts	
	Yes	Other. Specify Collections		
4.8	Johns Hopkins Health System Nonpriority Creditor's Name	Last 4 digits of account number		Unknown
	P.O. Box 417714 Boston, MA 02241	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Che	ck all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim	ı:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation a report as priority claims	agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing plans	s, and other similar debts	
	Yes	Other. Specify Healthcare		
4.9	Midland Funding	Last 4 digits of account number 808	8	\$635.00
	Nonpriority Creditor's Name 320 East Big Beaver Suite 300	When was the debt incurred? 201	8-2019	
	Troy, MI 48083 Number Street City State Zip Code	As of the date you file, the claim is: Che	ck all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim	ı:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation a report as priority claims	agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing plans	s, and other similar debts	
	Yes	Other. Specify Collections		

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Debtor	1 Tonya Lawson	Case number (if known)	
4.1			
0	MVA	Last 4 digits of account number	\$400.00
	Nonpriority Creditor's Name 6601 Ritchie Highway Glen Burnie, MD 21062	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Judgment	
4.1	N. L.	5040	A47.440.00
1	Nelnet Nonpriority Creditor's Name	Last 4 digits of account number 5010	\$17,140.00
	P.O. Box 82561 Lincoln, NE 68501-2561	When was the debt incurred? 2019	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	☐ Other. Specify	
		Student Loan	
	WLCC Lending FFG, DBA Fair Trust		
4.1	Group	Last 4 digits of account number	\$1,500.00
	Nonpriority Creditor's Name		
	PO Box 213	When was the debt incurred? 2019	
	#1 Wakpamni Lake Housing Batesland, SD 57716		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other, Specify	

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Zagima II.C dha Plua Piyar		
Zagime, LLC dba Blue River Lending	Last 4 digits of account number	\$1,2
Nonpriority Creditor's Name		
P.O. Box 1182	When was the debt incurred? 2019	
Lac Du Flambeau, WI 54538	- A control of the state of the	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Credit	

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total claims	6a.	Domestic support obligations	6a.	\$ 0.00
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 2,800.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 2,800.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 17,140.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 15,206.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 32,346.00

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Fill in this inform	mation to identify your	case:		
Debtor 1	Tonya Lawson			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF MARYLAND		
Case number				
(if known)				Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the r, Street, City, State and ZIF	e contract or lease ^o Code	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.5	*				
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_

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Fill in this	information to identify your	case:			
Debtor 1	Tonya Lawson				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	DISTRICT OF MARYLA	AND		
Case numb	ber				
(if known)					Check if this is an
					amended filing
Official	l Form 106H				
	lule H: Your Cod	ohtore			42/45
Scried	ule II. Toul Cou	enroi 2			12/15
your name	and case number (if known you have any codebtors? (If	. Answer every question			o of any Additional Pages, write
■ No					
☐ Yes	i				
	hin the last 8 years, have you a, California, Idaho, Louisiana				states and territories include
	Go to line 3.				
☐ Yes	s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line Form	2 again as a codebtor only	f that person is a guaran	tor or cosigner. Make	sure you have listed th	g with you. List the person shown le creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor	ID O- d-			ditor to whom you owe the debt
ľ	Name, Number, Street, City, State and Z	IP Code		Check all schedule	s that apply:
3.1				☐ Schedule D, line	9
	Name			□ Schedule E/F, li	ne
				☐ Schedule G, line	e
7	Number Street			_	
•	City	State	ZIP Code		
3.2				☐ Schedule D, line)
	Name			☐ Schedule E/F, li	
				☐ Schedule G, line	e
-	Number Street			_	
(City	State	ZIP Code		

Fill	in this information to	o identify your ca	ase:							
	otor 1	Tonya Laws								
	otor 2 ouse, if filing)					_				
Uni	ted States Bankrupt	tcy Court for the	DISTRICT OF MARYL	_AND		_				
	se number						Check if this is: An amende A suppleme 13 income a	nt showing		chapter
0	fficial Form	106I					MM / DD/ Y		owing date.	
	chedule I: `		ome				IVIIVI / DD/ T			12/15
sup spo atta	plying correct info use. If you are sep ch a separate shee	rmation. If you arated and you	sible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	ng jointly, and your th you, do not inclu	spouse i	s living	with you, incluated with your spo	ide informa use. If more	tion about e space is	your needed,
1.	Fill in your emplo	oyment		Debtor 1			Debtor 2	or non-filir	ng spouse	
	If you have more t		Employment status	■ Employed			☐ Emplo	yed		
	attach a separate information about		Linployment status	☐ Not employed			☐ Not er	nployed		
	employers.		Occupation	Claims Adminis	strator					
	Include part-time, self-employed wo		Employer's name	Social Security	Admini	stratio	n			
	Occupation may in or homemaker, if		Employer's address	6820 Hospital D Suite 100 Rosedale, MD 2						
			How long employed th	nere? 28 year	's					
Par	rt 2: Give Det	ails About Mon	thly Income							
	mate monthly inco		ate you file this form. If y	ou have nothing to r	eport for a	any line	, write \$0 in the	space. Inclu	ıde your nor	n-filing
-	ou or your non-filing : e space, attach a se	•	ore than one employer, co	ombine the informatio	n for all e	mploye	rs for that perso	n on the line	es below. If y	ou need
						Fo	or Debtor 1	For Debt		
2.			ry, and commissions (becalculate what the monthly		2.	\$	7,512.27	\$	N/A	
3.	Estimate and list	monthly overti	ime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross l	Income. Add lin	ne 2 + line 3.		4.	\$	7,512.27	\$	N/A_	

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Tonya Lawson	=		Case	number (if knowr	1)				
					Fo	r Debtor 1			ebtor	2 or pouse	
	Cop	by line 4 here	4.		\$	7,512.2	7	\$		N/A	_
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5	a.	\$	1,383.14	4	\$		N/A	
	5b.	Mandatory contributions for retirement plans	51	b.	\$	60.10		\$		N/A	_
	5c.	Voluntary contributions for retirement plans	50	c.	\$	0.0	0	\$		N/A	_
	5d.	Required repayments of retirement fund loans	50	d.	\$	0.0		\$		N/A	_
	5e.	Insurance		e.	\$_	660.4	_	\$		N/A	_
	5f.	Domestic support obligations	51		\$_	0.00	_	\$		N/A	_
	5g. 5h.	Union dues Other deductions. Specify:	5 <u>9</u>	g. h.+	\$_ \$	36.83 0.00	_	\$		N/A N/A	_
^		· · · · · · · · · · · · · · · · · · ·	_		· –		_				_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ _	2,140.5		\$		N/A	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	5,371.70	õ	\$		N/A	<u>-</u>
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
	٠.	monthly net income.		a.	\$_	0.00	_	\$		N/A	_
	8b.	Interest and dividends	81	b.	\$_	0.0	<u>) </u>	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	C.	\$	0.00	n	\$		N/A	
	8d.		80		\$-	0.00	_	\$		N/A	_
	8e.	Social Security	86	e.	\$	0.0	_	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	81		\$_	0.0	_	\$		N/A	_
	8g.	Pension or retirement income	89	_	\$_	0.00		\$		N/A	_
	8h.	Other monthly income. Specify:	_ 81	h.+	\$_	0.0) -	- \$		N/A	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	. [\$	0.0	D	\$		N/	A
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		5,371.76 +	\$		N/A	= \$	5,371.76
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				0,07 1.70	Ψ-		14//	-	0,01 111 0
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not excify:	dep						hedule		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rester that amount on the Summary of Schedules and Statistical Summary of Certaillies							12.	\$	5,371.76
13.	Do	you expect an increase or decrease within the year after you file this form	?						L	Combi month	ned ly income
		No.									

Official Form 106l Schedule I: Your Income page 2

						•		
Fill	in this informa	tion to identify yo	our case:					
Deb	tor 1	Tonya Laws	on				k if this is:	
Deb	tor 2						An amended filing A supplement show	ving postpetition chapter
(Spo	ouse, if filing)					_	13 expenses as of	01 1
Unit	ed States Bankr	uptcy Court for the	: DISTRI	CT OF MARYLAND		-	MM / DD / YYYY	
	e number nown)							
Oi	fficial Fo	rm 106J				-		
		J: Your	Exper	1989				12/15
Be info nur	as complete a ormation. If m nber (if know	and accurate as ore space is ne n). Answer eve	s possible eded, atta ry questio	. If two married people and the control of the cont				or supplying correct
Par 1.	t 1: Descr Is this a join	ibe Your House	ehold					
••	■ No. Go to							
			in a separ	ate household?				
	□ N		·					
	□ Ye	es. Debtor 2 mu:	st file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of Deb	tor 2.	
2.	Do vou have	e dependents?	□ No					
	Do not list Do Debtor 2.	-	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents				Daughter		22	■ Yes
					Son		30	□ No ■ Yes
								■ res □ No
								☐ Yes
								□ No
								☐ Yes
3.	, ,	enses include f people other t	han	No				
		d your depende		Yes				
Dor				h. Evnenses				
Est exp	imate your ex		our bankr	uptcy filing date unless y y is filed. If this is a supp				
the	value of such	n assistance an		government assistance i			Your expe	enses
(Un	ficial Form 10	v.,					. car oxp	
4.		r home owners ad any rent for th		ses for your residence. I or lot.	nclude first mortgag	e 4. \$		642.00
	If not includ	ed in line 4:						
	4a. Real e	state taxes				4a. \$		0.00
		rty, homeowner's	s, or renter	's insurance		4b. \$		0.00
	•	•		upkeep expenses		4c. \$		135.00
		owner's associa				4d. \$		0.00
5.	Additional n	nortgage paym	ents for yo	our residence, such as ho	me equity loans	5. \$		0.00

	Utilities:			
	Co. Floatricity host natural goo			
	6a. Electricity, heat, natural gas	6a.	\$	350.00
	6b. Water, sewer, garbage collection	6b.	\$	180.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.		195.00
	6d. Other. Specify:	6d.	· · —	0.00
	Food and housekeeping supplies	7.	\$	750.00
	Childcare and children's education costs	8.	·	0.00
	Clothing, laundry, and dry cleaning	9.	\$	150.00
	Personal care products and services	10.		100.00
	Medical and dental expenses	11.	· : ———	160.00
	Transportation. Include gas, maintenance, bus or train fare.		<u> </u>	100.00
	Do not include car payments.	12.	\$	200.00
	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	150.00
	Charitable contributions and religious donations	14.	\$	75.00
	Insurance.		<u> </u>	70.00
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.		300.00
	15d. Other insurance. Specify:	15d.	·	0.00
	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.			3.00
	Specify:	16.	\$	0.00
	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	728.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
	Your payments of alimony, maintenance, and support that you did not repo		· —	
	deducted from your pay on line 5, Schedule I, Your Income (Official Form 1		\$	0.00
	Other payments you make to support others who do not live with you.	,	\$	0.00
	Specify:	19.		
١.	Other real property expenses not included in lines 4 or 5 of this form or on	Schedule I: Yo	our Income.	
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.		0.00
	Other: Specify: Student Loan Repayments		+\$	255.00
				233.00
	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	4,370.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106	6J-2	\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	4,370.00
				· · · · · ·
	Calculate your monthly net income.	00	¢.	= 4= / = -
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.		5,371.76
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	4,370.00
	One Outline Commence the commence of			
	23c. Subtract your monthly expenses from your monthly income.	23c.	\$	1,001.76
	The result is your monthly net income.	230.		1,001110
4.	Do you expect an increase or decrease in your expenses within the year after	ter you file this	s form?	
	For example, do you expect to finish paying for your car loan within the year or do you expect			ease or decrease because
		- 0		
	modification to the terms of your mortgage?			
	modification to the terms of your mortgage? No.			

Fill in this informa	ation to identify your	case:		
Debtor 1	Tonya Lawson			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	_
(Spouse II, IIIIng)	riist Name	Middle Name	Last Name	
United States Bank	cruptcy Court for the:	DISTRICT OF MARYLAND		_
Case number				_ 0
(if known)				☐ Check if this is an amended filing
Official Form Declaration	-	n Individual De	btor's Schedule	S 12/15
If two married peo	ple are filing together	, both are equally responsible	for supplying correct informatio	n.
obtaining money of	or property by fraud in U.S.C. §§ 152, 1341, 1	n connection with a bankruptc		e statement, concealing property, or 250,000, or imprisonment for up to 20
Did you pay o	or agree to pay some	one who is NOT an attorney to	help you fill out bankruptcy form	ns?
■ No				
☐ Yes. Na	me of person			h Bankruptcy Petition Preparer's Notice, aration, and Signature (Official Form 119)
	of perjury, I declare rue and correct.	that I have read the summary a	and schedules filed with this dec	laration and
X /s/ Tonya	a Lawson		X	
Tonya La			Signature of Debtor 2	
Date <u>Ja</u>	nuary 13, 2020		Date	

Official Form 106Dec

Fill in this info	rmation to identify you	ur case:			
Debtor 1	Tonya Lawson First Name	Middle News	Last Name		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the	: DISTRICT OF MARYLAN	ND		
Case number					
(if known)					Check if this is an
					amended filing
Official F					
Statemen	nt of Financial	Affairs for Individ	duals Filing for B	Bankruptcy	4/19
information. If		sible. If two married people a l, attach a separate sheet to estion.			
Part 1: Give	Details About Your M	larital Status and Where Yoເ	ı Lived Before		
	our current marital stat	ue?			
_	our current mantai stat	.us:			
☐ Marrie					
■ Not m	arried				
2. During the	e last 3 years, have you	ı lived anywhere other than	where you live now?		
■ No					
☐ Yes. l	ist all of the places you	lived in the last 3 years. Do no	ot include where you live nov	٧.	
Debtor 1	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there
		ever live with a spouse or leq alifornia, Idaho, Louisiana, Ne			
■ No					
_	Make sure you fill out So	chedule H: Your Codebtors (O	fficial Form 106H).		
	•	·	,		
Part 2 Exp	lain the Sources of Yo	ur Income			
Fill in the to	otal amount of income y	mployment or from operating ou received from all jobs and a unhave income that you receive	all businesses, including part	-time activities.	ndar years?
□ No ■ Yes. F	Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income	Gross income	Sources of income	Gross income
		Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
For last calend	dar voar:	□ Warra arminiana	\$90,500.00	— 10/2iii	and excidencial
	December 31, 2019)	☐ Wages, commissions, bonuses, tips	φ 9 0,500.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
	lar year before that: December 31, 2018)	☐ Wages, commissions, bonuses, tips	\$90,000.00	☐ Wages, commissions, bonuses, tips	
	, ,	☐ Operating a business		☐ Operating a business	
Official Form 107		· -	fairs for Individuals Filing for B		page 1
				- P	rago.

De	ebtor 1	То	nya Laws	on			C	ase number (if known)		
				Debtor	• 1			Debtor 2		
				Source	es of income all that apply.		s income e deductions and ions)	Sources of inc		Gross income (before deductions and exclusions)
5.	Include and o	de ind other (come regard public bene		come is taxable. Exa ; rental income; inter	amples of est; divid	other income are ends; money coll	e alimony; child supplected from lawsuits;	royalties; an	ecurity, unemployment, d gambling and lottery
	List e	ach s	source and t	he gross income from	each source separa	tely. Do n	ot include income	e that you listed in lin	ne 4.	
		No								
		Yes.	Fill in the de	etails.						
				Debtor	1			Debtor 2		
					es of income e below.	each	income from source e deductions and ions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3:	List	Certain Pa	yments You Made B	efore You Filed for	Bankrup	tcy			
6.	_	i ther No.	Neither De	or Debtor 2's debts bebtor 1 nor Debtor 2 primarily for a persona	has primarily consu	ımer deb		ebts are defined in 11	U.S.C. § 10	1(8) as "incurred by an
			□ No. □ Yes	not include payment	litor to whom you pai o not include paymer s to an attorney for tl	d a total onts for don	of \$6,825* or mor mestic support ob uptcy case.	e in one or more pay oligations, such as cl	yments and the support a	nd alimony. Also, do
			* Subject	to adjustment on 4/01/	/22 and every 3 year	s after tha	at for cases filed	on or after the date of	of adjustment	
		Yes.		or Debtor 2 or both h 90 days before you fil				otal of \$600 or more	?	
			■ No.	Go to line 7.						
			□ Yes	List below each crecinclude payments fo attorney for this bank	r domestic support o					t creditor. Do not nclude payments to an
	Cred	ditor'	s Name and	d Address	Dates of payme	nt	Total amount paid	Amount you still owe	Was this p	payment for
7.	Inside of whi a bus alimo	ers in ich yo iness ny.	clude your r ou are an of		partners; relatives of in control, or owner o	any gene of 20% or	nt on a debt you ral partners; part more of their voti	nerships of which you	ou are a gene ny managing	ral partner; corporations agent, including one for
		No Voc	l iot all sa:	nonto to on incider						
			Name and	nents to an insider. Address	Dates of payme	nt	Total amount paid	Amount you still owe	Reason fo	or this payment
							palu	Juli Owe		

Del	btor 1 Tonya Lawson		Cas	se number (if know	n)	
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost		ments or transfer a	any property on	account of a de	ebt that benefited an
	■ No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount	Amount you still owe		this payment
			paid	Still Owe	include cred	intor's flame
Par	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.					
	■ No □ Yes Fill in the details					
	Yes. Fill in the details. Case title	Nature of the case	Court or agency		Status of th	0.0200
	Case number	Nature of the case	Court or agency		Status of th	ie case
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below		erty repossessed, f	oreclosed, garn	ished, attached	d, seized, or levied?
	No. Go to line 11.Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Dat	е	Value of the
		Explain what happened	d			property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bed No Yes. Fill in the details.		luding a bank or fir	nancial institutio	on, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Dat take	e action was en	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a		erty in the possessi	ion of an assigr	ee for the bene	efit of creditors, a
	No					
	☐ Yes					
Par	rt 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup ■ No	otcy, did you give any gift	s with a total value	of more than \$6	300 per person	?
	☐ Yes. Fill in the details for each gift.					
	Gifts with a total value of more than \$600 per person	Describe the gifts			es you gave gifts	Value
	Person to Whom You Gave the Gift and Address:					
14.	Within 2 years before you filed for bankrup No	otcy, did you give any gift	s or contributions v	with a total valu	e of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or cor	ntribution.				
	Gifts or contributions to charities that tot more than \$600 Charity's Name		u contributed		es you tributed	Value
	Address (Number, Street, City, State and ZIP Code)					
Par	rt 6. List Cortain Losses					

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, Official Form 107

Deb	tor 1	Tonya Lawson			Case number ((if known)	
	or gai	mbling?					
		No Yes. Fill in the details.					
		ribe the property you lost and	Describ	oe any insurance coverage for the lo	oss	Date of your	Value of property
	now	the loss occurred		the amount that insurance has paid. L ce claims on line 33 of <i>Schedule A/B</i> :		loss	lost
Par	t 7:	List Certain Payments or Transfer	s				
	consu	ulted about seeking bankruptcy or	preparin	d you or anyone else acting on your g a bankruptcy petition? s, or credit counseling agencies for ser			rty to anyone you
		No					
	— Y	es. Fill in the details.					
	Addr Emai	on Who Was Paid ess il or website address on Who Made the Payment, if Not \	You	Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment
	Sand 575 Suite Balti	chez Garrison & Associates, LI S. Charles St. e 404 imore, MD 21201 chez@SanchezGarrison.com		Attorney Fees		12/2019	\$100.00
17.	promi		ditors or	d you or anyone else acting on your to make payments to your creditors ed on line 16.		r transfer any prope	rty to anyone who
	_	No -					
		es. Fill in the details.		Description and value of any prop	ortv	Data navment	Amount of
	Addr	on Who Was Paid ess		Description and value of any propertransferred	erty	Date payment or transfer was made	payment
	transf Includ includ	ferred in the ordinary course of you	ur busine s made a	is security (such as the granting of a se		•	
		on Who Received Transfer		Description and value of		any property or	Date transfer was
	Addr	ress		property transferred	payments paid in ex	received or debts change	made
	Pers	on's relationship to you					
	benef	n 10 years before you filed for band iciary? (These are often called assendo for the fill in the details.		did you transfer any property to a so on devices.)	elf-settled tru	ıst or similar device	of which you are a
	Nam	e of trust		Description and value of the prope	erty transferr	ed	Date Transfer was
							made

Debtor 1 Tonya Lawson

Case number (if known)

Par	List of Certain Financial Accounts, Inst	truments, Safe Deposit	Boxes, and Stora	ge Units	
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ ■ No □ Yes. Fill in the details.	r other financial accour	ts; certificates of		
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yo cash, or other valuables?	ear before you filed for	bankruptcy, any s	safe deposit box or other deposi	cory for securities,
■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, St State and ZIP Code)		escribe the contents	Do you still have it?
22.	Have you stored property in a storage unit or	r place other than your	home within 1 yea	ar before you filed for bankruptc	y?
	■ No □ Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		escribe the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control f	or Someone Else			
23.	Do you hold or control any property that son for someone.	neone else owns? Inclu	de any property y	ou borrowed from, are storing fo	or, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, St Code)	erty? Detate and ZIP	escribe the property	Value
Par	t 10: Give Details About Environmental Info	rmation			
For	the purpose of Part 10, the following definitio	ns apply:			
	Environmental law means any federal, state, toxic substances, wastes, or material into the regulations controlling the cleanup of these	e air, land, soil, surface	water, groundwa	• •	
	Site means any location, facility, or property to own, operate, or utilize it, including dispos	•	nvironmental law	, whether you now own, operate	or utilize it or used
	Hazardous material means anything an envir hazardous material, pollutant, contaminant, o		s a hazardous wa	aste, hazardous substance, toxic	substance,
Rep	ort all notices, releases, and proceedings that	t you know about, rega	rdless of when the	ey occurred.	
24.	Has any governmental unit notified you that	you may be liable or po	tentially liable un	der or in violation of an environn	nental law?
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental uni Address (Number, St ZIP Code)		Environmental law, if you know it	Date of notice

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Del	otor 1	Tonya Lawson		Case	number (if known)	
25.	Have	e you notified any governmental unit o	of any release of hazardous material?			
		No				
		Yes. Fill in the details.				
		ne of site Iress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		nvironmental law, if you now it	Date of notice
26.	Have	e you been a party in any judicial or ac	dministrative proceeding under any envir	onme	ental law? Include settlements	and orders.
		No				
		Yes. Fill in the details.				
		e Title e Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Natu	re of the case	Status of the case
Par	t 11:	Give Details About Your Business o	r Connections to Any Business			
27.	With	in 4 years before you filed for bankrur	otcy, did you own a business or have any	v of th	ne following connections to an	v husiness?
	•••••		l in a trade, profession, or other activity, e		J	y buomese.
		_	npany (LLC) or limited liability partnership		-	
		☐ A partner in a partnership	,pa, (220, 0	r (.,	
		☐ An officer, director, or managing e	executive of a corporation			
		_	ing or equity securities of a corporation			
	_					
	_	No. None of the above applies. Go to				
	Bus	Yes. Check all that apply above and fi siness Name	ill in the details below for each business. Describe the nature of the business		Employer Identification number	\r_
	Add	Iress			Do not include Social Security	
	(Nun	nber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed	
28.		in 2 years before you filed for bankrup tutions, creditors, or other parties.	ptcy, did you give a financial statement to	o any	one about your business? Incl	ude all financial
		No				
		Yes. Fill in the details below.				
	Nan		Date Issued			
		Iress ber, Street, City, State and ZIP Code)				
Par	t 12:	Sign Below				
are with 18 U	true a a ba J.S.C.	and correct. I understand that making	iinancial Affairs and any attachments, and a false statement, concealing property, o o \$250,000, or imprisonment for up to 20	r obt	aining money or property by fr	
То	nya l	awson e of Debtor 1	Signature of Debtor 2			
Dat	e J	anuary 13, 2020	Date			
Did	you a	ttach additional pages to Your Staten	nent of Financial Affairs for Individuals Fi	iling i	for Bankruptcy (Official Form 1	107)?
I N	lo			-		
□ Y	'es					
Did ■ N		oay or agree to pay someone who is no	ot an attorney to help you fill out bankrup	ptcy f	forms?	
			ruptcy Petition Preparer's Notice, Declaration			
Offic	ial For	m 107 State	ment of Financial Affairs for Individuals Filing	for Ba	ankruptcy	page 6

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Debtor 1 Tonya Lawson Case number (if known)

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
_	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court District of Maryland

	District of Maryland		
re Tonya Lawson		Case No.	
	Debtor(s)	Chapter	13
VERI	FICATION OF CREDITOR	R MATRIX	
e above-named Debtor hereby verifies t	hat the attached list of creditors is true and	d correct to the best	of his/her knowledge.
Date: January 13, 2020	/s/ Tonya Lawson		

Signature of Debtor

Baltimore City Water (Finance Director) 200 Holiday St.
Baltimore, MD 21202

Bright Lending PO Box 578 Hays, MT 59527

Capital One Bank, N.A. P.O. Box 30281 Salt Lake City, UT 84130-0281

CB/Indigo PO Box 4499 Beaverton, OR 97076

Comptroller of MD 110 Carroll St Annapolis, MD 21411

Credit Acceptance Corp. PO Box 513 Southfield, MI 48037

Credit One P.O. Box 98872 Las Vegas, NV 89193

CreditCube P.O. Box 133 Finley, CA 95435

Dovenmuenle Mortgage, INC 1 Corporate Drive Suite 360 Lake Zurich, IL 60047 IC System
PO Box 64378
Saint Paul, MN 55164

Johns Hopkins Health System P.O. Box 417714 Boston, MA 02241

Midland Funding 320 East Big Beaver Suite 300 Troy, MI 48083

MVA 6601 Ritchie Highway Glen Burnie, MD 21062

Nelnet P.O. Box 82561 Lincoln, NE 68501-2561

WLCC Lending FFG, DBA Fair Trust Group PO Box 213 #1 Wakpamni Lake Housing Batesland, SD 57716

Zagime, LLC dba Blue River Lending P.O. Box 1182 Lac Du Flambeau, WI 54538